	OCT 8 700	u g					
No.	ITION FOR F	ENSION OF TIME UND	ER 37 CFR 1.136(a)			Docket Number (Optional) 740756-2063	
CERTIFICATE OF MAILING OR TRANSMISSION			In re Application of Shunpei YAMAZAKI et al.				
	[37 CFR 1.8(a)]		Application Number 09/436,984				
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-		For SEMICONDUCTOR DEVICE AND MANUFACTURING METHOD THEREOF					
1450, or being facsimile transmitted to the USPTO at, on			Group Art Unit 2823		Examiner William D. Coleman		
Signature:							
Name:							
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and appropriate entity fee are as follows							
(check time period desired):							
		One month (37 CFR 1.17	(a)(1)) - (\$55/\$110))			\$
	⊠ T	wo months (37 CFR 1.1	7(a)(2)) - (\$215/\$4	30)			\$430.00
	ПΤ	hree months (37 CFR 1.				\$	
	_		17(a)(4)) - (\$765/\$1530)		\$		
	□F	ive months (37 CFR 1.1	7(a)(5)) - (\$1040/\$2	2080)			\$
	Applicant	claims small entity statu	18.	: 1	0/13/2004	MBEYENE1 0000000	3 192380 03436984
	A check to	o cover the fee is enclose	ed. 03 FC:1252 430.00 DA				
	Payment by credit card. Form PTO-2038 is attached.						
		nissioner has already be n to a Deposit Account.	en authorized to cha	arge fee	s in this		
The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-2380 I have enclosed a duplicate copy of this sheet.							
I an	n the 🔲 a	pplicant/inventor					
	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
attorney or agent of record.							
	□ a	ttorney or agent under 3 Registration number	er if acting under 37 CFR 1.34(a)				
	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2039.						
	Octob					Signature . Costellia, Reg. No. 35,483 ed or printed name	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple							

forms if more than one signature is required, see below.

Total of ______ forms are submitted.